

April 26, 2001

Bayer Corporation  
1884 Miles Avenue  
P.O. Box 40  
Elkhart, IN 46515-0040

Hon. Commissioner of Patents  
& Trademarks  
Box: Patent Application  
Washington, DC 20231

PATENT



RE: Application for U.S. Letters Patent covering the  
Invention of: Gary E. Rehm, Michael J. Pugia and  
Paul F. Corey

Entitled: URINARY TRYPSIN INHIBITOR ASSAY  
CONTAINING A CHELATING AGENT

Docket No.: MSE #2610

Sir:

Transmitted herewith for filing is an application for U.S.  
Letters Patent above identified. This application includes the  
following:

- ☒ 24 Pages of specification, including claims and abstract
- ☐ \_\_\_\_\_ Sheets of drawing
- ☐ An assignment of the invention to Bayer Corporation (and  
cover sheet)
- ☐ A certified copy of a \_\_\_\_\_ application
- ☒ Declaration, power of attorney and petition
- ☐ Information disclosure statement

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**CLAIMS AS FILED**


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## Independent Claims

.....TOTAL (A) 2

## Dependent Claims

Dependent on one claim	<u>12</u>	x	1	=	<u>12</u>
Dependent on two claims	_____	x	2	=	_____
Dependent on three claims	_____	x	3	=	_____
Dependent on four claims	_____	x	4	=	_____
Dependent on five claims	_____	x	5	=	_____
Dependent on _____ claims	_____	x	_____	=	_____
Dependent on _____ claims	_____	x	_____	=	_____
Dependent on _____ claims	_____	x	_____	=	_____

TOTAL (B) 12

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**FEE CALCULATION**


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Total (A) =	<u>2</u>	-	3	=	<u>0</u>	x	\$80.00	=	\$ <u>-0-</u>
Total (A) + (B) =	<u>14</u>	-	20	=	<u>0</u>	x	\$18.00	=	\$ <u>-0-</u>
Basic fee								=	\$ <u>710.00</u>
Fee for filing multiple dependent claims (\$270.00)=								=	\$ <u>-0-</u>
Total filing fee								=	\$ <u>710.00</u>
Assignment recordal fee								=	\$ <u><del>40.00</del></u>
Check enclosed for the total amount calculated								=	\$ <u>710.00</u>

The Commissioner is hereby authorized to treat any concurrent or future reply, requiring a petition for an extension of time under 37 CFR 1.136 for its timely submission, as incorporating, a petition for extension of time for the appropriate length of time and to charge all additional fees, including fees under 37 CFR 1.17, which may be required, or credit any overpayment to Account No. 13-3375. A duplicate copy of this sheet is enclosed.

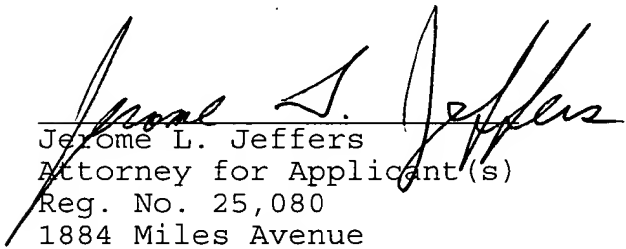
ATTENTION MAIL ROOM:

If for any reason this application is found to be incomplete, please advise by collect telephone call to Area Code (219) 264-8394.

Kindly acknowledge receipt of this application by returning the stamped, self-addressed post card enclosed herewith.

Respectfully submitted,

BAYER CORPORATION



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/jr  
JLJ07001

Enclosures